

State Historical Society of North Dakota Historical Marker Program Application

FOR OFFICE USE ONLY

Marker Number
Date Approved
Date Installed

Section 1. Proposed Marker Title and Text

(Proposed Title and Text is subject to change by the State Historical Society of North Dakota.

Proposed Marker Title:

- A. On a separate sheet, provide the proposed text for the marker, not to exceed 250 words.
- B. Following the proposed text, provide the reference sources used to develop the text. Each source must include author, title, place and date of publication, publisher, and page number.
- C. In the case of original documents such as diary entries and letters submit photocopies of the applicable sections of the original documents. Include the name of the document, the collection, and the repository where it is located.
- D. Unpublished manuscripts, privately printed histories and articles other than those in scholarly periodicals will be considered as supplementary sources only.

Section 2. Applicant and Sponsor Contact Information

Applicant Name:

Daytime Telephone:

Sponsoring Organization, if relevant:

E-mail:

Street Address:

City:

State:

Zip Code:

Section 3. Proposed Marker Location

Preferred Location: Please provide the physical address and/or directions to where this historical marker will be located. Also, provide the township range, section, and quarter section.

- A. **On a separate sheet**, provide a detailed map that marks the location where this historical marker will be located.

- B. **As an attachment** to this document, provide one color photograph showing the proposed location for the historical marker. Explain why this location is relevant to the topic of the historical marker.

Section 4. Location for the Historical Marker Placement

Name of the Property Owner:

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner)

Daytime Telephone:

E-mail:

Section 5. Funding Source

The sponsor is responsible for funding the historical marker, including its purchase and other costs associated with the installation of the marker. Please provide the name of the person or organization that is providing the funds to purchase the proposed historical marker. Installation is the responsibility of the sponsor.

Name of the Sponsor:

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner)

Daytime Telephone:

E-mail:

Section 6. Long Term Maintenance

The person or organization is responsible for the maintenance and upkeep of the proposed historical marker.

Name of the Person/Organization responsible for maintenance:

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner) [Click here to enter text.](#)

Daytime Telephone:

E-mail:

Please submit applications to:

Historical Marker Program Coordinator
Archaeology & Historic Preservation Division
State Historical Society of North Dakota
612 East Boulevard Avenue
Bismarck ND 58505

Telephone: 701.328.2672

**State Historical Society of North Dakota
Historical Marker Program Application**

Appendix A: Permissions

The following signatures are required prior to final approval of a new Historical Marker.

- 1. Property owner Agreement**
- 2. Funding Agreement**
- 3. Maintenance Agreement**

I. Property Owner for location of the Marker Installation

Owner statement of approval:

As the owner, or the official representative of the owner, of this property, I am aware of and agree to the placement of an Official North Dakota Historical Marker on my property.

Name of the Property Owner:

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner)

Daytime Telephone:

E-mail:

Private (Individual)

Public (Local)

Private (For Profit)

Public (State)

Private (Non Profit)

Public (Federal)

By my signature I hereby agree to terms stated above and certify that I have the authority to enter into such an agreement on behalf of the above named party.

Owner (or Representative) Signature

Date

Printed Name:

II. Funding Agreement

Agreement to Fund:

As the sponsor of the _____ Historical Marker I/we understand that the sponsor is responsible for funding the historical marker, including its purchase and other costs associated with the installation of the marker. I/we agree to provide funding for the purchase, manufacture and installation of this marker.

Name of the Sponsor:

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner)

Daytime Telephone:

E-mail:

By my signature I hereby agree to terms stated above and certify that I have the authority to enter into such an agreement on behalf of the above named party.

Representative Signature

Date

Printed Name:

III. Maintenance Agreement

Long Term Maintenance agreement:

The following person or organization is responsible for the maintenance and upkeep of the proposed historical marker. I/we agree to monitor and maintain the marker by cleaning and/or retouching paint as necessary. If vandalized the marker must be replaced or removed.

Name of the Person/Organization responsible for maintenance:[Click here to enter text.](#)

Street Address:

City:

State:

Zip Code:

Contact person (if different from the property owner)

Daytime Telephone:

E-mail:

By my signature I hereby agree to terms stated above and certify that I have the authority to enter into such an agreement on behalf of the above named party.

Representative Signature

Date

Printed Name:

State Historical Society of North Dakota Historic Marker Program Approval

We find that the attached application for the installation of the [Click here to enter text](#). Historic Marker is acceptable and that all necessary documentation has been provided. We further find that the subject of this marker is of [Click here to enter text](#). significance and hereby approve the purchase and installation of the marker in the location designated in this application.

Signature of Historic Marker Program Coordinator

Date

Printed Name: